

APPLICATION FOR AREA LIGHT SERVICE

Monthly Rate Schedule: These basic rates do not include monthly charges for additional facilities, area lighting poles, underground service or any contribution required under this schedule and will be charged a 3% sales tax.

Quantity	Code	Lighting Type	Monthly Rate Per Fixture	Monthly kwh Per Fixture	Amount Due
		Mercury Vapor:			
	A96	175 watt mercury vapor	\$11.20	69	
	A97	400 watt mercury vapor	\$17.37	149	
		High Pressure Sodium Vapor:			
	A98	100 watt HPS vapor	\$12.83	46	
	A79	150 watt HPS vapor	\$13.15	54	
	A99	250 watt HPS vapor	\$15.85	86	
	A78	400 watt HPS vapor	\$22.30	152	
3% TAX					
SUB-TOTAL					

Underground Fee: Charges listed are per pole. (*The one time contribution will be due in full with your first bill.*)

Quantity	Code	Charges	Amount Due
	A95	\$3.62 Per Month	
		\$181.00 (*one time contribution*)	
SUB-TOTAL			

Type of Pole: Charges listed are per pole.

Quantity	Code	Pole Type	Monthly Charge	Amount Due
	A93	Wood 30 ft.	\$2.34	
	A94	Metal or Post (Fiberglass) 12 ft.	\$5.55	
	A92	Decorative Square Metal 30 ft.	\$11.90	
SUB-TOTAL				
GRAND TOTAL				

I, _____ for _____,
Print Name *Print Company Name*

do hereby apply for area lighting provided by The Town of Wake Forest at

_____, and I do hereby agree to pay \$ _____
Address

as the monthly fee to be included on my Account # _____.

The acceptance of this contract shall not be less than three (3) years for overhead service and not less than (5) five years for underground service and shall extend from year to year thereafter until terminated by the Customer or Customer may terminate the contract before the expiration of the initial Contract by paying the Town of Wake Forest a sum of money equal to 40% of the bill which otherwise would have been rendered for the unexpired months of the initial Contract Period.

The Town may require the Customer to initially make termination deposit which will not exceed the termination amount computed in accordance with the above paragraph. Such termination deposit will be refunded in equal amounts at the end of each full year service is rendered. This annual refund will be the termination deposit divided by the number of years in the Contract Period.

If you have any further questions contact Drew Brown at (919)-554-6107.

Accepted by

Date

Signature of Applicant

Date

Phone: _____
(Home)

(Work)